



## Recommended Daily COVID-19 Screen Questionnaire

““Common sense above all else””

### ASK THE FOLLOWING QUESTIONS WHEN YOU SCREEN:

- Have you or has anyone in your home had contact within the last fourteen days with any person under screening/testing for COVID-19, or with anyone with known or suspected COVID-19?
- Do you currently have any of the following symptoms?
  - Fever (100.4°F or higher), or a sense of having a fever.
  - New cough that you cannot attribute to another health condition.
  - New shortness of breath that you cannot attribute to another health condition.
  - New sore throat that you cannot attribute to another health condition.
  - New muscle aches that you cannot attribute to another health condition or that may have been caused by a specific activity (such as physical exercise).

If an individual answers **YES** to any of the screening questions, immediately contact your doctor and stay home until advised otherwise by your doctor.